

## RESULTS

### *Descriptive Analysis*

Some descriptive findings on the major sources of health-related knowledge are presented in Table 1, which contains weighted estimates of the percent distributions of responses to a question on AIDS information (AIDSINFO) and a comparable question on more general medical information (MEDINFO). Because of the closeness of these two questions in the interview, the types of information they addressed were probably considered to be mutually exclusive by survey respondents. Technically this is not true since AIDS information is subsumable under the rubric of "general medical information."

Broadcast and written media together were found to be the main source of information on AIDS for 90 percent of North Carolina adults. By contrast, we estimated that 74 percent of adults in the state would see the media as their primary source of general health information. This 16 percent difference can be explained by noting that 63 percent of adults saw television as their principal source of AIDS information, while only about 47 percent relied mainly on television for more general health-related knowledge.

A number of other impressions can be drawn from Table 1. First, television was clearly the top choice for both types of information, followed next by newspapers and then closely thereafter by magazines and journals. Radio occupied a very distant fourth place. Second, doctors and nurses appeared to play a more important role in conveying general medical knowledge than knowledge about AIDS (19 percent versus 1 percent). Finally, local health departments were not considered to be a major source of either type of information in this population.

Weighted estimates of the percent distribution for responses to several knowledge and attitude questions are presented in Table 2. Analysis of the first group of questions, testing an individual's knowledge about transmission of AIDS, revealed a high level of understanding about this dimension of the disease. The estimated percentages of correct ("yes") answers ranged from 87 to 97 percent; the highest percentages indicated for transmission through heterosexual contact. North Carolina adults appeared to be somewhat less knowledgeable about prenatal transmission of the AIDS virus and about the efficacy of prevention through safer sexual practices (e.g., by using condoms or reducing the number of sex partners).

Several questions in the survey dealt with a number of the common myths about AIDS, although all have to do with transmission of the AIDS virus as in the previous group. For this group of items percentage estimates of the correct answer ("no"), ranging from 57 to 84 percent, were in all cases somewhat lower than estimates for questions concerning the known modes of transmission. Estimates of the percentage of "don't know" answers were also generally higher for the myths items than the previous group of items (6-15 percent for myths versus 2-10 percent for transmission). The most important fallacies in this population appear to be those dealing with transmission through using the same toilet seat, giving blood, a mosquito bite, or sharing food.

The first of two groups of opinion questions addressed the need for education. The clear message from these questions is that education is seen as being important in dealing with AIDS. For example, it is estimated that a majority of North Carolina adults with an opinion (49 to 44 percent) believed that not enough is being done to educate the public. In addition, more than 90 percent of the adults in this population favored some form of education about AIDS in both junior and senior high schools.

Another series of questions in the survey dealt with the respondents' attitude about the closeness of the AIDS problem to themselves. Four levels of proximity were used: the state, the respondent's community, the respondent's acquaintances, and the respondent himself or herself. Findings seem to indicate an inverse relationship between the perceived threat of AIDS and the closeness of the reference group, since in general the percentage estimate for a "yes" response drops as one moves from the state level (72 percent for NCPROB) down to the respondent level (16 percent for SELF). The anomalous increase from 24 percent at the community level (TOWNPROB) to 38 percent at the acquaintances level (ANYONE) may be due to the wording of the questions in this group. The first two questions refer to the AIDS "problem," a concept perhaps seen as somewhat less immediate and therefore less likely to be answered in the affirmative than the "threat" of AIDS mentioned in the last two questions.

The final group of survey items in Table 2 deal with the perceived threat of AIDS in health care facilities. Estimates from one of these questions indicated that a high percentage of North Carolina adults (83) are concerned about getting AIDS from a blood transfusion in hospitals. By contrast we